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Bib Data Sheet

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|--|---|------------------------------------|--|--|
| <b>SERIAL NUMBER</b><br>09/652,827   | <b>FILING DATE</b><br>08/31/2000<br><b>RULE</b> -   | <b>CLASS</b><br>370                | <b>GROUP ART UNIT</b><br>2664  | <b>ATTORNEY DOCKET NO.</b><br>45017-4278.1 |
| <b>APPLICANTS</b><br>Paul Hodgins, Brussels, BELGIUM;<br>Gert Josef Elisa Copejans, Brussels, BELGIUM;<br>Yoen Apts, Brussels, BELGIUM;<br>Johan De Vos, Brussels, BELGIUM;  |   |                                    |  |  |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A DIV OF 08/979,474 11/26/1997  |   |                                    |  |  |
| <b>** FOREIGN APPLICATIONS *****</b><br>EUROPEAN PATENT OFFICE (EPO) 96203338.7 11/27/1996<br>EUROPEAN PATENT OFFICE (EPO) 96203341.1 11/27/1996<br>EUROPEAN PATENT OFFICE (EPO) 96203340.3 11/27/1996<br>EUROPEAN PATENT OFFICE (EPO) 96203339.5 11/27/1996<br>EUROPEAN PATENT OFFICE (EPO) 96203334.6 11/27/1996<br>EUROPEAN PATENT OFFICE (EPO) 96203336.1 11/27/1996 |   |                                    |  |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 10/31/2000</b>   |   |                                    |  |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <input checked="" type="checkbox"/>   |   | <b>STATE OR COUNTRY</b><br>BELGIUM | <b>SHEETS DRAWING</b><br>13  | <b>TOTAL CLAIMS</b><br>29                  |
| <b>ADDRESS</b><br><br>Frommer Lawrence & Haug LLP<br>745 Fifth Avenue<br>New York, NY 10151  |   | <b>INDEPENDENT CLAIMS</b><br>1     |  |  |
| <b>TITLE</b><br>Method and apparatus for serving data  |   |                                    |  |  |
| <b>FILING FEE RECEIVED</b><br>852  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                    | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> |  |